



## Georgia Mountains Regional Commission Georgia Mountains Workforce Development

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Welcome to the Georgia Mountains Workforce Development Area program. The Workforce Investment Act (WIA) program assists customers who need training to become re-employed in today's workforce. Due to corporate downsizing, business relocation or life changes, the doors to your employer may have closed but many new doors may be opening.

To begin the application process for the WIA program, we ask that you read and complete the following documents thoroughly. Once the documents are completed, please forward (hand-deliver, mail or e-mail) to our office. After review, a staff member will contact you to ask for additional information and/or arrange an appointment for orientation.

Applications for the WIA program **does not create an entitlement** to services, and nothing in the Act shall be construed to establish a right of action for an individual to obtain services under WIA. The program is based on eligibility, suitability, individual customer needs and funding availability.

### **INTAKE Information Checklist**

1. \_\_\_\_\_ Affidavit of Citizenship (Applicant Status Affidavit); signed and notarized
2. \_\_\_\_\_ Register for Employment Services at your local GDOL Unemployment Office Career Center
3. \_\_\_\_\_ Copy of Driver's License – **LEGAL NAMES MUST MATCH**
4. \_\_\_\_\_ Copy of Social Security Card – **LEGAL NAMES MUST MATCH**
5. \_\_\_\_\_ Copy of Permanent Resident Card, if applicable – **LEGAL NAMES MUST MATCH**
6. \_\_\_\_\_ Signed copy of the Rights Statement
7. \_\_\_\_\_ Copy of DD-214, if you are a Veteran
8. \_\_\_\_\_ Copy of Selective Service Registration, if you are a male born after 01/01/1960 ([www.sss.gov](http://www.sss.gov))
9. \_\_\_\_\_ Copy of Separation Notice **AND** Unemployment Insurance Claims Examiner's Determination Letter
10. \_\_\_\_\_ Copy of acceptance letter stating chosen program of study
11. \_\_\_\_\_ Copy of program of study outline listing required courses
12. \_\_\_\_\_ Career Choice Research Worksheet (CCRW) – PAGE 6 OF APPLICATION with 5 complete program related job postings
13. \_\_\_\_\_ Applicable Assessments (O'NET – [www.mynextmove.org](http://www.mynextmove.org))
14. \_\_\_\_\_ If applicable, food stamp determination MUST reflect household members AND amount receiving – may use COMPASS account information, if available
15. \_\_\_\_\_ If applicable, copy of Financial Aid Verification form
16. \_\_\_\_\_ If applicable, ALL ORIGINAL OFFICIAL post-secondary education transcripts – NOT HIGH SCHOOL OR GED

FYI – Case Manager may require a background check and drug screen; depending on your program of study.

Please feel free to contact the office if you have questions or concerns. Additional information is also available on our website at [www.gmrc.ga.gov](http://www.gmrc.ga.gov).